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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF MISSOURI | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|---|--|---|---|
| | _ | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your | full name | | |
| | your pictul exam licens Bring identi | e the name that is on government-issued re identification (for ople, your driver's se or passport). If your picture ification to your ing with the trustee. | Alan First name Bailey Middle name Craine, Jr. Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | used Includ | ther names you have I in the last 8 years de your married or | | |
| 3. | Only your numl | en names. the last 4 digits of Social Security ber or federal ridual Taxpayer tification number | xxx-xx-7459 | |

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Debtor 1 Alan Bailey Craine, Jr.

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 732 Ley Street | If Debtor 2 lives at a different address: |
| | | Excelsior Springs, MO 64024 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Clay County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Page 3 of 49 Document Case number (if known) Debtor 1 Alan Bailey Craine, Jr. Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No.

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

residence?

☐ Yes.

No. Go to line 12.

this bankruptcy petition.

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| Deb | otor 1 Alan Bailey Craine, | Jr. | | Boodinent | | Case number (if known) | | | |
|---|---|--------------------|--|-------------------------------------|--------------------------|---------------------------|---------------------------------|-------|--|
| | | | | | | | | | |
| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | | | |
| 12. Are you a sole proprietor of any full- or part-time business? | | ■ No. | o. Go to Part 4. | | | | | | |
| | | ☐ Yes. | Name | and location of business | S | | | | |
| | A sole proprietorship is a | | | | | | | | |
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name | | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State & Z | ZIP Code | | | | |
| | it to this petition. | | Chec | the appropriate box to o | • | | | | |
| | | | | Health Care Business (| (as defined in 11 U.S.C | . § 101(27A)) | | | |
| | | | | Single Asset Real Esta | te (as defined in 11 U.S | 3.C. § 101(51B)) | | | |
| | | | | Stockbroker (as defined | d in 11 U.S.C. § 101(53 | 5A)) | | | |
| | | | | Commodity Broker (as | defined in 11 U.S.C. § | 101(6)) | | | |
| | | | | None of the above | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedul 11 U.S.C. 1116(1)(B). | | | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chapter 1 | 1. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | No. I am filing under Chapter 11, but I am NOT a small business debtor accorde. | | | | to the definition in the Bankru | ıptcy | |
| | | ☐ Yes. | I am f | ling under Chapter 11 ar | nd I am a small busines | s debtor according to the | e definition in the Bankruptcy | Code. | |
| Pari | t 4: Report if You Own or | Have Any | / Hazardo | us Property or Any Pro | perty That Needs Imn | nediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | | |
| | property that poses or is alleged to pose a threat | □ Yes. | | | | | | | |
| | of imminent and identifiable hazard to | □ res. | What is | he hazard? | | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | iate attention is why is it needed? | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | | | |

Number, Street, City, State & Zip Code

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Debtor 1 Alan Bailey Craine, Jr. Case number (if known)

Part 5: Explain Your Efforts to R

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Der | Alan Balley Craine | , Jr. | | Case nu | ITTIDET (If known) | | | |
|-----|---|---|--|---|---|--|--|--|
| Par | t 6: Answer These Quest | ions for R | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | | business debts? Business debts are devestment or through the operation of the | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you | owe that are not consumer debts or bus | siness debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapt | er 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | . Do you estimate that after any exempt available to distribute to unsecured credi | property is excluded and administrative expenses tors? | | | |
| | administrative expenses | | □ No | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | | | |
| | | □ 200-9 | 99 | | | | | |
| 19. | How much do you estimate your assets to be worth? | □ \$100, | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities to be? | | 50,000 001 - \$100,000 001 - \$500,000 | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | | |
| | | □ \$500, | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| Par | t 7: Sign Below | | | | | | | |
| For | you | I have ex | camined this petition, and I d | eclare under penalty of perjury that the in | nformation provided is true and correct. | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | |
| | | bankrupt and 357 | cy case can result in fines u 1. | nt, concealing property, or obtaining mor p to \$250,000, or imprisonment for up to | ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | Alan Ba | Bailey Craine, Jr. illey Craine, Jr. e of Debtor 1 | Signature of D | ebtor 2 | | | |
| | | Executed | | Executed on | MM (DD ()000/ | | | |
| | | | MM / DD / YYYY | | MM / DD / YYYY | | | |

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| Debtor 1 | Alan Bailey Craine, Jr. | Case number (if known) | |
|----------|-------------------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Tracy L. Robin | | Date | February 7, 2018 MM / DD / YYYY | | | |
|--|--------------------------|---------------|------------------------------------|--|--|--|
| Tracy L. Robinso | on | | | | | |
| The Law Offices | of Tracy L. Robinson, LC | | | | | |
| 818 Grand Blvd., Suite 505 Kansas City, MO 64106 | | | | | | |
| Number, Street, City, Sta | te & ZIP Code | | | | | |
| Contact phone 816. | 842.1317 | Email address | admin@tlrlaw.com | | | |
| 36691 | | | | | | |
| Kansas City, MO Number, Street, City, Sta Contact phone 816. | 0 64106 te & ZIP Code | Email address | admin@tlrlaw.com | | | |

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| Fill in this inform | mation to identify your | case: | | | |
|---|-------------------------|------------------|-------------|---|-----------------------|
| Debtor 1 | Alan Bailey Craine | , Jr. | | | |
| | First Name | Middle Name | Last Name | - | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | WESTERN DISTRICT | OF MISSOURI | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|--|-------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 40,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 16,083.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 56,083.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 80,533.85 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 127.00 |
| | Your total liabilities | \$ | 80,660.85 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,513.74 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,505.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| ŝ. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Alan Bailey Craine, Jr.

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,746.71

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|-----|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | | | Doc | ument | Page 10 of 49 | | | | | |
|----------------|--|--------------|---------------------|----------------------|---|---|-------------|---------------------------|---------------------------|--------|---|
| Fill i | n this information to | identify | your case and t | his filin | g: | | | | | | |
| Debt | or 1 Alan | Bailey (| Craine, Jr. | | | | | | | | |
| | First N | | <u> </u> | e Name | | Last Name | | _ | | | |
| Debt (Spous | or 2 se, if filing) First N | ame | Middl | e Name | | Last Name | | _ | | | |
| Linite | d States Bankruntau | Court for | that MESTERN | I DISTE | RICT OF MIS | SOLIBI | | | | | |
| Unite | ed States Bankruptcy | Court for | me: WESTERI | יו פוט וי | AICT OF WIS | SOURI | | _ | | | |
| Case | e number | | | | | _ | | | | | Check if this is an amended filing |
| ~ · · | | 00 A /F | | | | | | | | | |
| _ | icial Form 1 | | _ | | | | | | | | |
| <u> </u> | <u>hedule A/</u> | <u>B: P</u> | roperty | | | | | | | | 12/15 |
| | you own or have any No. Go to Part 2. Yes. Where is the prop | | uitable interest in | any resid | dence, buildin | g, land, or similar propert | ty? | | | | |
| _ | 732 Ley Street Street address, if available | or other des | ecription | Wha | Single-family | rty? Check all that apply y home ulti-unit building m or cooperative | the | e amount o | of any secure | d clai | or exemptions. Put ms on <i>Schedule D:</i> ecured by Property. |
| | Excelsior Springs | MO | 64024-0000 | | | ed or mobile home | | ırrent valı tire prope | | | rrent value of the rtion you own? |
| - | City | State | ZIP Code | | Investment p | property | | \$40 | 0,000.00 | • | \$40,000.00 |
| | | | | | | | De | scribe th | e nature of v | our c | wnership interest |
| | | | | | | | ٠. | | simple, ten | ancy | by the entireties, or |
| | | | | wno | Debtor 1 on | st in the property? Check o | one " | ne estate | , ii kiiowii. | | |
| | Clay | | | | Debtor 2 onl | | | | | | |
| _ | County | | | | | d Debtor 2 only | | | | | |
| | | | | | | of the debtors and another | | (see insti | | nmun | ity property |
| | | | | | | | | | | | |
| | | | | | r information erty identifica | you wish to add about th tion number: | is item, su | ich as loc | al | | |
| | | | | prop Clay \$73 | erty identifica / County, M ,500.00. Ho | • | erty as h | aving ar | n Appraise by for sale | | |
| | | | | prop Clay \$73 | erty identifica / County, M ,500.00. Ho | rition number: lissouri lists this prope wever, debtor has pla | erty as h | aving ar | n Appraise by for sale | | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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| Deb | tor 1 A | llan Bailey Craine, Jr. | | Case number (if known) | |
|---------------|-------------------------|--|--|----------------------------|---|
| 3. C a | ars, vans, | trucks, tractors, sport utility ve | ehicles, motorcycles | | |
| | | , , , , , | • | | |
| | No | | | | |
| | Yes | | | | |
| | | | | | |
| 3.1 | Make: | Dodge | Who has an interest in the property? Check one | | red claims or exemptions. Put ecured claims on Schedule D: |
| | Model: | Caliber Heat | Debtor 1 only | | e Claims Secured by Property. |
| | Year: | 2011 | Debtor 2 only | Current value of th | e Current value of the |
| | Approxir | mate mileage: 120,000+ | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | formation: | \square At least one of the debtors and another | | |
| | ı | 1B3CB5HA4BD160641 | | \$5,475.0 | 00 \$5,475.00 |
| | \$5,475 | Clean Retail Value: | ☐ Check if this is community property (see instructions) | Ψο, 17 ο. | |
| | ψυ,470 | .00 | | | |
| | | Ford | | Do not deduct secur | red claims or exemptions. Put |
| 3.2 | | | Who has an interest in the property? Check one | the amount of any s | ecured claims on Schedule D: |
| | Model: | Focus ZX3 | Debtor 1 only | Creditors Who Have | e Claims Secured by Property. |
| | Year: | 2004 | Debtor 2 only | Current value of th | |
| | • • • | mate mileage:formation: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | 3FAFP31Z64R112964 | At least one of the debtors and another | | |
| | | Average Trade-In Value: | ☐ Check if this is community property | \$900.0 | 00 \$450.00 |
| | \$900.0 | | (see instructions) | | _ |
| | | r owns this vehicel jointly | | | |
| | with Ni | cholas Bell) | | | |
| | Yes | | | | |
| | | | wn for all of your entries from Part 2, including | | \$5,925.00 |
| .p | ages you | nave attached for Fart 2. Write | that number here | | |
| Part | 3: Descri | be Your Personal and Household I | tems | | |
| | | | nterest in any of the following items? | | Current value of the |
| , | , | , | | | portion you own? Do not deduct secured claims or exemptions. |
| | | goods and furnishings | | | |
| _ | <i>xampies:</i>] No | Major appliances, furniture, linen | s, cnina, kitchenware | | |
| | Yes. De | a a riba | | | |
| | res. De | scribe | | | |
| | | Household good | ds, furnishings, wall hangings, knick knacks, | vard tools. | |
| | | and equipment, | | , , | \$300.00 |
| | | <u> </u> | | <u> </u> | |
| | | Machan & Davis | | | \$700.00 |
| | | Washer & Dryer | | | <u>Ψ100.00</u> |
| | | | | | |
| | ectronics | | | | |
| Е | xamples: | Televisions and radios; audio, vic including cell phones, cameras, i | deo, stereo, and digital equipment; computers, prir | nters, scanners; music col | lections; electronic devices |
| |] No | morading our priorios, ourieras, i | nodia playoro, garrioo | | |
| _ | _ | escribe | | | |
| | | | | | |

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| Debtor 1 | Alan Bailey C | Craine, Jr. Case num | ber (if known) | |
|---|---|--|-------------------|---|
| | | One smartphone, one computer, two televisions, one gaming system, and other miscellaneous electronics | | \$700.00 |
| Examp | | figurines; paintings, prints, or other artwork; books, pictures, or other art objects ons, memorabilia, collectibles | ; stamp, coin, o | or baseball card collections; |
| Examp No | nent for sports ar bles: Sports, photo musical instru | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, | skis; canoes ar | nd kayaks; carpentry tools; |
| ■ No | | s, shotguns, ammunition, and related equipment | | |
| □ No | | othes, furs, leather coats, designer wear, shoes, accessories | | |
| | | Wearing apparel, clothing and shoes. | | \$120.00 |
| 13. Non-f <i>Exan</i> □ No | arm animals nples: Dogs, cats, l | birds, horses | | |
| | | 1 pet cat | | \$0.00 |
| ■ No | other personal and | d household items you did not already list, including any health aids you d | id not list | |
| | | of all of your entries from Part 3, including any entries for pages you have a number here | attached | \$1,820.00 |
| | escribe Your Finan wn or have any lo | cial Assets egal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | have in your wallet, in your home, in a safe deposit box, and on hand when you f | ile your petition | n |
| | | | on hand | \$650.00 |
| | | | | |

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| De | ebtor 1 Alan | Bailey Cra | aine, J | r. | | | Case number (if known) | |
|-----|--|--------------------------|----------|---------------------|-------------|---|--|------------------|
| | | | | | | | | |
| 17. | ins | ecking, sav | | | | certificates of deposit; sha the same institution, list ea | ares in credit unions, brokerage houses, and o ach. | ther similar |
| | □ No ■ Yes | | | | | Institution name: | | |
| | | | 17.1. | Checking | | NBKC Bank | | \$50.00 |
| | | | | | | | | |
| | | | 17.2. | Checking | | US Bank | | \$28.00 |
| 18. | | | | | | ge firms, money market ac | counts | |
| | ■ No □ Yes | | | Institution or iss | suer name | : | | |
| 19. | Non-publicly t | traded stoo | k and | interests in inc | corporate | d and unincorporated bu | ısinesses, including an interest in an LLC, p | partnership, and |
| | ■ No | a a aifia infor | matian | about them | | | | |
| | ☐ Yes. Give sp | pecilic inion | | ne of entity: | | | % of ownership: | |
| 20. | Negotiable ins Non-negotiabl | s <i>trument</i> s in | clude p | ersonal checks | , cashiers' | e and non-negotiable instances, promissory notes to someone by signing or | s, and money orders. | |
| | ■ No □ Yes. Give sp | ooifia inform | notion (| shout tham | | | | |
| | □ Tes. Give sp | ecilic illioni | | ier name: | | | | |
| 21. | Retirement or Examples: Inte | | | | (k), 403(b) | , thrift savings accounts, o | or other pension or profit-sharing plans | |
| | Yes. List each | ch account s | | ely. of account: | | Institution name: | | |
| | | | 401(k | <u>:</u>) | | Fidelity Investments | | \$7,610.00 |
| | | all unused or reements w | deposit | s you have mad | | you may continue service of utilities (electric, gas, wate | ter), telecommunications companies, or others | |
| 23. | Annuities (A c ■ No | contract for a | a perio | dic payment of r | money to y | ou, either for life or for a n | number of years) | |
| | ☐ Yes | Issu | er nam | e and description | on. | | | |
| 24. | Interests in an 26 U.S.C. §§ 53 ■ No | | | | a qualific | ed ABLE program, or und | der a qualified state tuition program. | |
| | ☐ Yes | Insti | tution r | name and descri | iption. Sep | parately file the records of | any interests.11 U.S.C. § 521(c): | |
| | Trusts, equita ■ No □ Yes. Give sp | | | | ty (other t | han anything listed in lir | ne 1), and rights or powers exercisable for y | our benefit/ |
| 26. | | | | | | ner intellectual property m royalties and licensing a | agreements | |
| | ■ No | necific infor | mation | about them | | | | |

Official Form 106A/B Schedule A/B: Property page 4

Case 18-40338-can7 Doc 1 Filed 02/07/18 Entered 02/07/18 16:28:47 Desc Main Page 14 of 49 Document Case number (if known) Debtor 1 Alan Bailey Craine, Jr. 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance through employer \$0.00 Term life insurance through State Farm \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$8,338.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Filed 02/07/18 Entered 02/07/18 16:28:47 Case 18-40338-can7 Doc 1 Document Page 15 of 49 Debtor 1 Case number (if known) Alan Bailey Craine, Jr. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

Describe All Property You Own or Have an Interest in That You Did Not List Above

54. Add the dollar value of all of your entries from Part 7. Write that number here

53. Do you have other property of any kind you did not already list?

63. Total of all property on Schedule A/B. Add line 55 + line 62

Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

| Part | 8: List the Totals of Each Part of this Form | | | | |
|------|---|---|-------------|------------------------------|-------------|
| 55. | Part 1: Total real estate, line 2 | | | | \$40,000.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$5,925.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | | \$1,820.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$8,338.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | | \$16,083.00 | Copy personal property total | \$16,083.00 |

Official Form 106A/B Schedule A/B: Property page 6

\$0.00

\$56,083.00

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| Fill in this inform | | | | | |
|---------------------|-------------------------|--------------------|-------------|--|-----------------------|
| Debtor 1 | Alan Bailey Craine | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the: | WESTERN DISTRICT (| OF MISSOURI | | |
| Case number _ | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|-----------------------------------|---|--|--|
| Copy the value from Schedule A/B | Chec | | | |
| \$300.00 | | \$300.00 | RSMo § 513.430.1(1) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$700.00 | | \$700.00 | RSMo § 513.430.1(1) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$120.00 | | \$120.00 | RSMo § 513.430.1(1) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$650.00 | | \$600.00 | RSMo § 513.430.1(3) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$7,610.00 | • | \$7,610.00 | RSMo § 513.430.1(10)(f) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| | \$700.00 \$650.00 | \$700.00 | Copy the value from Schedule A/B \$300.00 \$300.00 \$300.00 \$300.00 \$300.00 \$700.00 \$700.00 \$100% of fair market value, up to any applicable statutory limit \$120.00 \$100% of fair market value, up to any applicable statutory limit \$120.00 \$100% of fair market value, up to any applicable statutory limit \$650.00 \$600.00 \$7,610.00 \$7,610.00 \$100% of fair market value, up to any applicable statutory limit | |

Debtor 1 Alan Bailey Craine, Jr.

Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

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Yes

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| Fill | in this informa | tion to identify you | r case: | | | |
|-------------------------|--|--|--|--|---|-----------------------------------|
| Deb | tor 1 | Alan Bailey Crain | | | | |
| Dob | tor 2 | First Name | Middle Name Last Name | | | |
| | use if, filing) | First Name | Middle Name Last Name | | | |
| Unit | ed States Bank | ruptcy Court for the: | WESTERN DISTRICT OF MISSOURI | | | |
| Cas (if kno | e number | | | | _ | if this is an ed filing |
| Offi | icial Form | 106D | | | | |
| Sc | hedule C | D: Creditors | Who Have Claims Secure | ed by Property | • | 12/15 |
| Be as is nee numb | s complete and a ceded, copy the A cert (if known). any creditors har I now the Cert is the Cert is complete and a cert is cert in the Cert is complete and a cert in the Cert is cert in the Cert is cert in the | accurate as possible. Indictional Page, fill it conversely | f two married people are filing together, both are early, number the entries, and attach it to this form. your property? is form to the court with your other schedules. | equally responsible for sup On the top of any additiona | plying correct informa al pages, write your na | |
| Pari | 1: List All | Secured Claims | | | | |
| for e | ach claim. If mor | e than one creditor has | nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As all order according to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Citibank/Sea | ars | Describe the property that secures the claim: | \$786.00 | \$700.00 | \$86.00 |
| | o owes the debto Debtor 1 only Debtor 2 only Debtor 1 and Debto | ity, State & Zip Code ?? Check one. or 2 only debtors and another m relates to a | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 3456 | | | |
| 2.2 | NBKC Bank Creditor's Name | | Pescribe the property that secures the claim: 732 Ley Street Excelsior Springs, MO 64024 Clay County Clay County, Missouri lists this property as having an Appraised Value of \$73,500.00. However, debtor has | \$28,000.00 | \$40,000.00 | \$25,873.85 |
| | o owes the debto Debtor 1 only Debtor 2 only Debtor 1 and Debto | ity, State & Zip Code ?? Check one. | placed this property for sale and over a year and 4 months the highest offer As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) | ecured | | |
| L | at least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | |

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| Debtor 1 Alan Bailey Craine, Jr. | | Case number (if know) | | |
|--|---|-----------------------|-------------|------------|
| First Name Middle N | ame Last Name | _ | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) Second M | ortagae | | |
| community debt | Other (including a right to offset) | ortgage | | |
| Date debt was incurred | Last 4 digits of account number 3371 | | | |
| | | | | |
| 2.3 NBKC Bank | Describe the property that secures the claim: | \$13,874.00 | \$5,475.00 | \$8,399.00 |
| Creditor's Name | 2011 Dodge Caliber Heat 120,000+ | | | |
| | miles VIN = 1B3CB5HA4BD160641 | | | |
| | NADA Clean Retail Value: \$5,475.00 | | | |
| 8320 Ward Parkway | As of the date you file, the claim is: Check all that | | | |
| Kansas City, MO 64114 | apply. ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or s | ecured | | |
| ☐ Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Wells Fargo Home | | | | |
| Mortgage | Describe the property that secures the claim: | \$37,873.85 | \$40,000.00 | \$0.00 |
| Creditor's Name | 732 Ley Street Excelsior Springs, MO | | | |
| | 64024 Clay County | | | |
| | Clay County, Missouri lists this | | | |
| | property as having an Appraised Value of \$73,500.00. However, debtor has | | | |
| Pankruptov | placed this property for sale and over a | | | |
| Bankruptcy Dept/Correspondence | year and 4 months the highest offer | | | |
| PO Box 10335 | As of the date you file, the claim is: Check all that apply. | | | |
| Des Moines, IA 50306 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | An agreement you made (such as mortgage or s | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | 2000 | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) First Morto | gage | | |
| Date debt was incurred | Last 4 digits of account number 7918 | <u> </u> | | |
| | | | | <u> </u> |
| Add the dollar value of your entries in C | Column A on this page. Write that number here: | \$80,533.85 | 1 | |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages. | \$80,533.85 | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| Debte | or 1 Alan Bailey Cr | aine, Jr. | | Case number (if know) | | |
|-------|--|------------------|-----------|--|--|--|
| | First Name | Middle Name | Last Name | | | |
| | Name, Number, Street, Citibank/Sears PO Box 6283 Sioux Falls, SD 57 | | | On which line in Part 1 did you enter the creditor? _2.1_ Last 4 digits of account number | | |
| | Name, Number, Street, Citibank/Sears PO Box 6241 Sioux Falls, SD 57 | | | On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number | | |
| | Name, Number, Street, Citibank/Sears PO Box 6497 Sioux Falls, SD 57 | | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | |
| | Name, Number, Street, National Bank of h 10700 Nall Avenu Overland Park, KS | Kansas City e | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | |
| | Name, Number, Street, National Bank of k 10700 Nall Avenu Overland Park, KS | Kansas City e | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number | | |
| | Name, Number, Street, Wells Fargo Home 666 Walnut Street Suite 400 Des Moines, IA 50 | e Mortgage | | On which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number | | |

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| | | Document | raye 21 01 49 | | |
|--|--|--|---|---|---|
| Fill in this | s information to identify your c | ase: | | | |
| Debtor 1 | Alan Bailey Craine, | Jr. | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | ing) First Name | Middle Name | Last Name | | |
| (Spouse if, fi | ing) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | WESTERN DISTRICT OF M | ISSOURI | | |
| Case num | nber | | | | |
| (if known) | | | | □ Ch | neck if this is an |
| | | | | an | nended filing |
| Official | Form 106E/E | | | | |
| | Form 106E/F | ha Haya Haaaayra | d Claima | | 40/45 |
| | ule E/F: Creditors W | | | W. NONDRIODITY -I | 12/15 |
| any execut Schedule G Schedule D left. Attach name and c | ory contracts or unexpired leases to Executory Contracts and Unexpired Creditors Who Have Claims Secuthe Continuation Page to this page tase number (if known). | that could result in a claim. Also red Leases (Official Form 106G) ired by Property. If more space i e. If you have no information to i | RITY claims and Part 2 for creditors to o list executory contracts on Schedt Do not include any creditors with pair is needed, copy the Part you need, for report in a Part, do not file that Part. | ule A/B: Property (Officia partially secured claims t ill it out, number the entr | I Form 106A/B) and on that are listed in ries in the boxes on the |
| Part 1: | List All of Your PRIORITY Uns | | | | |
| | y creditors have priority unsecured | claims against you? | | | |
| | . Go to Part 2. | | | | |
| ☐ Yes | i | / II | | | |
| Part 2: | | | | | |
| ` | y creditors have nonpriority unsec | | | | |
| □ No | . You have nothing to report in this pa | rt. Submit this form to the court wi | th your other schedules. | | |
| ■ Yes | S. | | | | |
| unsecu | ured claim, list the creditor separately | for each claim. For each claim list | the creditor who holds each claim. ted, identify what type of claim it is. Do u have more than three nonpriority uns | not list claims already inclu | uded in Part 1. If more |
| | | | | | Total claim |
| 4.1 S | ynchrony Bank/Walmart | Last 4 digits of a | ccount number | _ | \$127.00 |
| | onpriority Creditor's Name | When was the de | abt incurred? | | |
| Р | ttn: Bankruptcy Department O Box 965060 Irlando, FL 32896-5060 | when was the de | | | |
| N | umber Street City State Zlp Code | As of the date yo | ou file, the claim is: Check all that app | oly | |
| W | ho incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and ano | | ORITY unsecured claim: | | |
| | Check if this claim is for a comm | | | | |
| | ebt the claim subject to offset? | Obligations ari | sing out of a separation agreement or | divorce that you did not | |
| _ | No | <u></u> | ion or profit-sharing plans, and other si | milar dehts | |
| | | · | | | |
| |] Yes | Other. Specify | - | | |
| Part 3: | List Others to Be Notified Abo | out a Debt That You Already | Listad | | |
| 5. Use this is trying have mo | page only if you have others to be to collect from you for a debt you | notified about your bankruptcy, owe to someone else, list the or debts that you listed in Parts 1 o | , for a debt that you already listed in iginal creditor in Parts 1 or 2, then library and the additional creditors here | ist the collection agency | here. Similarly, if you |
| Name and | | - | or Part 2 did you list the original credit | | |
| SYNCB/ PO Box | | Line <u>4.1</u> of (Check one, | | th Priority Unsecured Clain | |
| | FL 32896-5024 | | ■ Part 2: Creditors with | th Nonpriority Unsecured (| Claims |
| | | Last 4 digits of account | number | | |

Last 4 digits of account number

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Debtor 1 Alan Bailey Craine, Jr.

Case number (if know)

Name and Address
SYNCB/Walmart
PO Box 965036
Orlando, FL 32896-5036

Case number (if know)

Day 1 Craine, Jr.

Case number (if know)

Part 2 did you list the original creditor?

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|--------------|-----|---|-----|----|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 127.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 127.00 |

Last 4 digits of account number

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| Fill in this information to identify your case: | | | | | | | | | |
|---|--------------------|--------------------|-------------|--|-----------------------|--|--|--|--|
| Debtor 1 | Alan Bailey Craine | e, Jr. | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| United States Bankruptcy Court for the: | | WESTERN DISTRICT O | OF MISSOURI | | | | | | |
| Case number | | | | | | | | | |
| (if known) | | | | | ☐ Check if this is an | | | | |
| | | | | | amended filing | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | = |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

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| | | Docume | nı Page 24 C |) 49 | |
|------------------------|---|---|---|--|---|
| Fill in th | is information to identify your | case: | | | |
| Debtor 1 | Alan Bailey Craine | a Ir | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | filing) First Name | Middle Name | Last Name | | |
| United S | tates Bankruptcy Court for the: | WESTERN DISTRICT | OF MISSOURI | | |
| | | | | | |
| Case nur (if known) | mber | | | | Charle if this is an |
| (II KIIOWII) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Officia | al Form 106H | | | | |
| | dule H: Your Cod | lahtars | | | 12/15 |
| Scrie | dule H. Toul Cou | ienioi 2 | | | 12/15 |
| ill it out, our nam | | boxes on the left. Attack). Answer every question | n the Additional Page : | to this page. On the to | needed, copy the Additional Page, p of any Additional Pages, write |
| _ | (| you are iming a joint babb, | ao not mot ounter opouet | | |
| ■ No | | | | | |
| Arizo | ne 2 again as a codebtor only | n, Nevada, New Mexico, Pu use, or legal equivalent live tors. Do not include your if that person is a guaran | erto Rico, Texas, Wash e with you at the time? spouse as a codebto tor or cosigner. Make | ington, and Wiśconsin.) r if your spouse is filin sure you have listed tl | |
| out | Column 1: Your codebtor | | | Column 2: The cre | editor to whom you owe the debt |
| | Name, Number, Street, City, State and Z | IP Code | | Check all schedule | |
| 2.4 | | | | Поментальна | |
| 3.1 | Name | | | ☐ Schedule D, lin | |
| | . tame | | | ☐ Schedule E/F, I☐ Schedule G, Iin | |
| | | | | Scriedule G, IIII | le |
| | Number Street | State | ZIP Code | | |
| | City | State | ZIP Code | | |
| | | | | Под так | |
| 3.2 | Name | | | Schedule D, lin | |
| | | | | ☐ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | ie |
| | Number Street | _ | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | | | |
|--------------------|--|-------------------------------|---|------------------|----------------|---------------------|------------------------|-----------------------------|--|------|
| De | btor 1 Alan Bailey (| Craine, Jr. | | | _ | | | | | |
| 1 - | btor 2 buse, if filing) | | | | _ | | | | | |
| Un | ited States Bankruptcy Court for the | : WESTERN DISTRICT | T OF MISSOURI | | _ | | | | | |
| | se number | | - | | | □ A | | ed filing ent showing | postpetition chapte | er |
| \circ | fficial Form 106I | | | | | | | | lowing date: | |
| | chedule I: Your Inc | omo | | | | N | 1M / DD/ Y | YYY | 45 | 2/1: |
| sup spo atta | as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. | are married and not filing wi | ng jointly, and your s _l ith you, do not includ | oouse e infor | is liv mati | ing with on abou | you, included your spo | ude informa ouse. If mor | ation about your re space is needed | d, |
| 1. | Fill in your employment | | Dobton 4 | | | | Dobtor |) ar nan fili | | |
| | information. | | Debtor 1 ■ Employed | | | | ☐ Emplo | or non-fili | ig spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ☐ Not employed | | | | □ Not e | • | | |
| | employers. | Occupation | Customer Service Specialist | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Rolling Frito-Lay S | Sales, | РС | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 7701 Legacy Drive Plano, TX 75024 | 9 | | | | | | |
| | | How long employed to | here? since 4/1 | 9/201 | 5 | | _ | | | |
| Pa | rt 2: Give Details About Mor | nthly Income | | | | | | | | |
| | imate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to rep | oort for | any | line, write | e \$0 in the | space. Inclu | ude your non-filing | |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | for all e | empl | oyers for | that perso | on on the line | es below. If you nee | эd |
| | | | | | | For Del | otor 1 | For Debt | tor 2 or g spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3 | ,992.65 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |

3,992.65

N/A

Calculate gross Income. Add line 2 + line 3.

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| Deb | tor 1 | Alan Bailey Craine, Jr. | _ | Cas | e number (if known) | | | |
|-----|---------------|---|------------|-----|---------------------|------|--------------------------|----------|
| | | | | Fo | or Debtor 1 | | ebtor 2 or ing spouse | |
| | Сор | y line 4 here | 4. | \$ | 3,992.65 | \$ | N/A | |
| 5. | List | all payroll deductions: | | _ | | | | |
| ٥. | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,025.95 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 199.64 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 81.40 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: Term life insurance | 5h.+ | \$ | 18.44 | + \$ | N/A | |
| | | Disability insurance (long & short term) | | \$ | 29.44 | \$ | N/A | |
| | | Health Savings Account | | \$ | 115.40 | \$ | N/A | |
| | | Accidental Death & Dismemberment | | \$_ | 8.64 | \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 1,478.91 | \$ | N/A | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 2,513.74 | \$ | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.00 | \$ | N/A | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$_ | | 2,513.74 + \$_ | | N/A = \$ | 2,513.74 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedul and contributions from an unmarried partner, members of your household, you are friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are no cify: | ır depend | | • | | edule J. 11. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The re e that amount on the Summary of Schedules and Statistical Summary of Certailes | | | | | 12. \$ | 2,513.74 |
| 10 | D | value avenue and an increase and decrease with in the constant of the date of the | ~ ? | | | | | income |
| 13. | Do y □ | you expect an increase or decrease within the year after you file this form No. Yes. Explain: | n <i>f</i> | | | | | |

| | | | | | 1 | | |
|---------------------|--|-----------------------|---|---|-------------------------------|--|--|
| Fill in th | nis information to ide | entify your case: | | | | | |
| Debtor 1 | 1 Alan B | ailey Craine, Jr | | | Che | ck if this is: | |
| Debtor 2 | 2 | | | | | An amended filing | wing postpetition chapter |
| | e, if filing) | | | | | 13 expenses as of | |
| United S | States Bankruptcy Cou | rt for the: WEST | ERN DISTRICT OF MISSO | URI | | MM / DD / YYYY | |
| | | | | | | | |
| Case nu (If know | | | | | | | |
| Offic | cial Form 10 |)6J | | | | | |
| Sch | edule J: Yo | our Expe | nses | | | | 12/1 |
| inform | complete and accu ation. If more spacer (if known). Answ | e is needed, att | e. If two married people ar ach another sheet to this on. | e filing together, b form. On the top of | oth are equ f any addition | ally responsible fo onal pages, write y | or supplying correct your name and case |
| Part 1: | Describe Your this a joint case? | Household | | | | | |
| | No. Go to line 2. | | | | | | |
| | No. Go to line 2. Yes. Does Debtor | 2 live in a sena | rate household? | | | | |
| _ | □ No | 2 o a copa | | | | | |
| | | or 2 must file Office | ial Form 106J-2, <i>Expenses</i> | for Separate House | ehold of Deb | tor 2. | |
| 2. D e | o you have depend | lents? ■ No | | | | | |
| | o not list Debtor 1 ar ebtor 2. | nd □ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| Do | o not state the | | | | | | □ No |
| de | ependents names. | | | | | | ☐ Yes |
| | | | | | | | □ No |
| | | | | - | | | ☐ Yes |
| | | | | | | | □ No □ Yes |
| | | | | | | | ☐ Yes |
| | | | | | | | ☐ Yes |
| 3. D e | o your expenses in | clude | l _{No} | - | | _ | L 103 |
| | ourself and your de | other than $\;\;$ | l Yes | | | | |
| Part 2: | Estimate Your | Ongoing Month | ly Expenses | | | | |
| expens | te your expenses | as of your bankı | uptcy filing date unless y cy is filed. If this is a supp | | | | |
| the val | | | government assistance in cluded it on Schedule I: Y | | | Your exp | enses |
| ,5010 | | | | | | | |
| | he rental or home of ayments and any rer | | nses for your residence. In or lot. | nclude first mortgag | e 4. § | . | 600.00 |
| If | not included in line | e 4: | | | | | |
| 4a | a. Real estate tax | es | | | 4a. \$ | S | 0.00 |
| 4b | | owner's, or rente | | | 4b. § | | 0.00 |
| 40 | | | upkeep expenses | | 4c. \$ | · | 25.00 |
| 4c | | ssociation or cor | idominium dues our residence. such as ho | mo oquity loose | 4d. \$ | | 0.00 |
| J. A | aannonai montuade | , pavillettis IUI V | var residence, SUCH as NO | me equity toatis | ວ. ເ | J. | 11111 |

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| ebtor 1 Alan E | ailey Craine, Jr. | Case num | ber (if known) | |
|----------------|--|--------------|----------------|----------|
| Utilities: | | | | |
| | ity, heat, natural gas | 6a. | \$ | 185.00 |
| | sewer, garbage collection | 6b. | \$ | 100.00 |
| 6c. Teleph | one, cell phone, Internet, satellite, and cable services | 6c. | \$ | 120.00 |
| 6d. Other. | Specify: | 6d. | \$ | 0.00 |
| | usekeeping supplies | 7. | · · | 400.00 |
| | d children's education costs | 8. | \$ | 0.00 |
| | ndry, and dry cleaning | 9. | · | 70.00 |
| • | e products and services | 10. | · | 40.00 |
| | dental expenses | 11. | · | 45.00 |
| | on. Include gas, maintenance, bus or train fare. | | Ψ | 45.00 |
| | e car payments. | 12. | \$ | 250.00 |
| | nt, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 30.00 |
| | ontributions and religious donations | 14. | · | 10.00 |
| . Insurance. | | | <u> </u> | 10.00 |
| | e insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life ins | | 15a. | \$ | 15.00 |
| 15b. Health | | 15b. | \$ | 0.00 |
| 15c. Vehicle | | 15c. | | 130.00 |
| | nsurance. Specify: | 15d. | · | 0.00 |
| | t include taxes deducted from your pay or included in lines 4 or 20. | | | 0.00 |
| | rsonal property taxes & licenses | 16. | \$ | 30.00 |
| | r lease payments: | | Ť | |
| | ments for Vehicle 1 | 17a. | \$ | 250.00 |
| • | ments for Vehicle 2 | 17b. | · - | 0.00 |
| • | Specify: Sears | 17c. | · | 35.00 |
| 17d. Other. | | 17d. 17d. | · | 0.00 |
| | nts of alimony, maintenance, and support that you did not report | | Ψ | 0.00 |
| | m your pay on line 5, Schedule I, Your Income (Official Form 100 | | \$ | 0.00 |
| . Other payme | nts you make to support others who do not live with you. | J.,. | \$ | 0.00 |
| Specify: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 19. | · | |
| | operty expenses not included in lines 4 or 5 of this form or on S | - | our Income. | |
| | ges on other property | 20a. | | 0.00 |
| 20b. Real e | | 20b. | \$ | 0.00 |
| | y, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| • | nance, repair, and upkeep expenses | 20d. | · - | 0.00 |
| | wner's association or condominium dues | 20e. | · | 0.00 |
| | y: Misc. (bank fees, postage, gifts, prof. fees, parking, etc.) | | +\$ | 90.00 |
| | | | +\$ | |
| Pel care (ve | t. care, food, supplies, etc.) | | -Ψ | 80.00 |
| Calculate yo | ur monthly expenses | | | |
| - | s 4 through 21. | | \$ | 2,505.00 |
| | e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | -2 | \$ | · · |
| | 22a and 22b. The result is your monthly expenses. | | \$ | 2,505.00 |
| | | | | |
| | ur monthly net income. | | | |
| | ne 12 (your combined monthly income) from Schedule I. | 23a. | | 2,513.74 |
| 23b. Copy y | our monthly expenses from line 22c above. | 23b. | -\$ | 2,505.00 |
| 220 Subtro | ct your monthly expenses from your monthly income. | | | |
| | st your montnly expenses from your montnly income. Sult is your <i>monthly net income</i> . | 23c. | \$ | 8.74 |
| | IS VI.II. (111111111111111111111111111111111 | _50. | 1.7 | |

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

| No. |
|-----|
|-----|

☐ Yes.

Explain here: The Rental Expense listed on line 4 of Schedule J is an anticipated expense because Debtor is surrendering his residence as part of this filing.

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| Fill in this infor | rmation to identify your | case: | | | | |
|---------------------------------|--|---------------------------|-------------|----------------------------|--|-------|
| Debtor 1 | Alan Bailey Craine | | | | | |
| | First Name | Middle Name | Las | st Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Loc | st Name | | |
| (Spouse II, IIIIIIg) | First Name | Middle Name | Las | si Name | | |
| United States B | ankruptcy Court for the: | WESTERN DISTRICT O | F MISSOU | RI | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check if this is amended filing | an |
| Official For | - | | 5 14 | | | |
| Declara | tion About a | in Individual | Debt | or's Schedule | es | 12/15 |
| Sig | ın Below | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorn | ey to help | you fill out bankruptcy fo | orms? | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | | ach <i>Bankruptcy Petition Preparer's</i> claration, and Signature (Official Fo | |
| | alty of perjury, I declare re true and correct. | that I have read the sumn | nary and s | chedules filed with this d | eclaration and | |
| X /s/ Ala | n Bailey Craine, Jr. | | х | | | |
| Alan B | Bailey Craine, Jr. ure of Debtor 1 | | | Signature of Debtor 2 | | |
| Date | February 7, 2018 | | | Date | | |

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| Fill in | this inform | ation to identify you | case: | | | |
|----------|-------------------|--|-------------------------------------|--|--|------------------------------------|
| Debto | r 1 | Alan Bailey Crain | | | | |
| Debto | r 2 | First Name | Middle Name | Last Name | | |
| | if, filing) | First Name | Middle Name | Last Name | | |
| United | d States Ban | kruptcy Court for the: | WESTERN DISTRICT OF | MISSOURI | | |
| Case | number | | | | | |
| (if know | n) | | | | - | Check if this is an |
| | | | | | | mended filing |
| Oπ: | -:-! - | 107 | | | | |
| | cial For | | A.C | | | |
| Stat | ement | of Financial A | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 |
| | | | | | equally responsible for sup additional pages, write you | |
| | |). Answer every ques | | uns form. On the top of any | additional pages, write you | ii name and case |
| Part 1 | Give De | etails About Your Ma | rital Status and Where You | Lived Before | | |
| | | current marital statu | | | | |
| | _ | ourrent maritar stata | . | | | |
| | I Married ■ No. 1 | | | | | |
| _ | Not marr | led | | | | |
| 2. D | uring the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | No | | | | | |
| | Yes. List | all of the places you li | ived in the last 3 years. Do no | ot include where you live now | | |
| C | Debtor 1 Prid | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. W | ithin the las | st 8 vears. did vou ev | ver live with a spouse or led | aal equivalent in a commun | ity property state or territor | ? (Community property |
| | | | | | co, Texas, Washington and V | |
| | No | | | | | |
| | _ | ce sure you fill out Sch | nedule H: Your Codebtors (Ot | fficial Form 106H). | | |
| Port 1 | Evoloin | the Courses of Vou | r Incomo | | | |
| Part 2 | Explain | the Sources of You | rincome | | | |
| Fi | II in the total | amount of income you | u received from all jobs and a | g a business during this ye all businesses, including part- e together, list it only once un | | ndar years? |
| г |] No | | | | | |
| | | n the details. | | | | |
| | | | D. () | | D.1. | |
| | | | Debtor 1 Sources of income | Grace income | Debtor 2 | Gross income |
| | | | Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | (before deductions and exclusions) |
| | | of current year until for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$4,627.85 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | ebtor 1 Alan | Bailey Craine, Jr. | | Case | e number (if known) | |
|----|----------------------------------|---|---|---|---|---|
| | | | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | or last calenda anuary 1 to D | ar year: ecember 31, 2017) | ■ Wages, commissions, bonuses, tips | \$38,429.15 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | ecember 31, 2016) | ■ Wages, commissions, bonuses, tips | \$35,254.02 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | ■ No □ Yes. Fi | ll in the details. | Debtor 1 | Gross income from | Debtor 2 | Gross income |
| | ■ No | • | come from each source separat | tely. Do not include income tr | nat you listed in line 4. | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| Pa | rt 3: List C | Certain Payments Yo | u Made Before You Filed for I | Bankruptcy | | |
| | Are either D | | 2's debts primarily consumer | | e are defined in 11 IISC & 10 | 4(0) " |
| 6. | i [| ndividual primarily for During the 90 days bei No. Go to line | a personal, family, or househol fore you filed for bankruptcy, did 7. | d you pay any creditor a total | of \$6,425* or more? | |
| 6. | i I | ndividual primarily for During the 90 days ber No. Go to line Yes List below paid that contincted | a personal, family, or househol fore you filed for bankruptcy, die | d purpose." d you pay any creditor a total d a total of \$6,425* or more in ts for domestic support oblig nis bankruptcy case. | of \$6,425* or more? n one or more payments and tations, such as child support a | he total amount you and alimony. Also, do |
| 6. | i □ ■ Yes. I | ndividual primarily for During the 90 days bei No. Go to line Yes List below paid that cont include * Subject to adjustme Debtor 1 or Debtor 2 | a personal, family, or househol fore you filed for bankruptcy, did 7. each creditor to whom you paid creditor. Do not include payment payments to an attorney for the | d purpose." d you pay any creditor a total d a total of \$6,425* or more in tts for domestic support oblig nis bankruptcy case. s after that for cases filed on umer debts. | of \$6,425* or more? n one or more payments and tations, such as child support ator after the date of adjustment | he total amount you and alimony. Also, do |
| 6. | i □ Yes. I | ndividual primarily for During the 90 days bei No. Go to line Yes List below paid that cont include * Subject to adjustme Debtor 1 or Debtor 2 | a personal, family, or househol fore you filed for bankruptcy, did 7. each creditor to whom you paid creditor. Do not include payment e payments to an attorney for the nt on 4/01/19 and every 3 years or both have primarily consulting fore you filed for bankruptcy, did | d purpose." d you pay any creditor a total d a total of \$6,425* or more in tts for domestic support oblig nis bankruptcy case. s after that for cases filed on umer debts. | of \$6,425* or more? n one or more payments and tations, such as child support ator after the date of adjustment | he total amount you and alimony. Also, do |

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|---|------------------|-------------------|-------------------------|--|
| Wells Fargo Home Mortgage Bankruptcy Dept/Correspondence PO Box 10335 Des Moines, IA 50306 | various | \$829.90 | \$37,873.85 | ■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other |

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| | | | Document P | age 32 of 49 | | | |
|-----|-----------------|--|---|--|---|--------------------------------|---|
| Deb | otor 1 | Alan Bailey Craine, Jr. | | | e number (if known) | | |
| 7. | Inside of wh | in 1 year before you filed for bankruptcers include your relatives; any general particly you are an officer, director, person in ciness you operate as a sole proprietor. 11 ny. | tners; relatives of any gene control, or owner of 20% or | eral partners; partners more of their voting | erships of which yo g securities; and ar | u are a gener ny managing a | al partner; corporations agent, including one for |
| | | No Yes. List all payments to an insider. | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | insid | n 1 year before you filed for bankruptc er? de payments on debts guaranteed or cosi | | nents or transfer a | any property on a | ccount of a d | ebt that benefited an |
| | | No Yes. List all payments to an insider | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment ditor's name |
| Par | t 4: | Identify Legal Actions, Repossessions | s, and Foreclosures | | | | |
| 9. | List a modif | in 1 year before you filed for bankrupto Il such matters, including personal injury of ications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | | e title e number | Nature of the case | Court or agency | | Status of the | ne case |
| 10. | | n 1 year before you filed for bankruptc k all that apply and fill in the details below | | rty repossessed, f | oreclosed, garnis | hed, attache | d, seized, or levied? |
| | | No. Go to line 11. Yes. Fill in the information below. | | | | | |
| | Cred | litor Name and Address | Describe the Property Explain what happened | | Date | | Value of the property |
| 11. | acco | in 90 days before you filed for bankrupt unts or refuse to make a payment beca No Yes. Fill in the details. | tcy, did any creditor, inclu | uding a bank or fir | nancial institution | , set off any | amounts from your |
| | Cred | litor Name and Address | Describe the action the | creditor took | Date a | action was | Amount |
| 12. | court | n 1 year before you filed for bankruptc -appointed receiver, a custodian, or an | | rty in the possess | ion of an assigne | e for the ben | efit of creditors, a |
| | _ | Yes | | | | | |
| Par | t 5: | List Certain Gifts and Contributions | | | | | |
| 13. | = 1 | in 2 years before you filed for bankrupt No Yes. Fill in the details for each gift. | cy, did you give any gifts | with a total value | of more than \$60 | 0 per person | ? |

Person to Whom You Gave the Gift and Address:

Gifts with a total value of more than \$600

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the gifts

Value

per person

Dates you gave the gifts

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| Det | otor 1 Alan Bailey Craine, Jr. | | Ca | se number (| (if known) | | | | |
|-----|---|---------|---|-------------|--|------------------------|--|--|--|
| | | | | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No | | | | | | | | |
| | ☐ Yes. Fill in the details for each gift or contribution. | | | | | | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | | Describe what you contributed | | Dates you contributed | Value | | | |
| Par | t 6: List Certain Losses | | | | | | | | |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Describe the property you lost and | Descri | be any insurance coverage for the los | S | Date of your | Value of property | | | |
| | how the loss occurred | Include | the amount that insurance has paid. List ace claims on line 33 of Schedule A/B: Pr | loss | lost | | | | |
| Par | t 7: List Certain Payments or Transfer | s | | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | |
| | □ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | You | Description and value of any proper transferred | ty | Date payment or transfer was made | Amount of payment | | | |
| | The Law Offices of Tracy L. Robinson 818 Grand Blvd., Suite 505 Kansas City, MO 64106 | n, LC | See Rule 2016(b) Statement | | | \$0.00 | | | |
| | 001 Debtorcc, Inc. 372 Summit Avenue Jersey City, NJ 07302 | | pre-filing credit counseling | | 1/31/2018 | \$14.95 | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any proper transferred | ty | Date payment or transfer was made | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | any property or received or debts change | Date transfer was made | | | |

Person's relationship to you

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Debtor 1 Alan Bailey Craine, Jr.

Case number (if known)

| 19. | beneficiary? (These are often called asset-protect | | / property to a | a seir-settie | a trust or similar device c | ir wnich you are a | | | |
|-----|--|---|-------------------|-----------------------|---|-------------------------------|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and va | alue of the pro | perty trans | sferred | Date Transfer was made | | | |
| Par | t 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | Boxes, and S | torage Unit | ts | | | | |
| | <u> </u> | • | • | • | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated. | ther financial accoun | nts; certificates | s of deposi | | , , | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | | ast 4 digits of | Type of acco | unt or | Date account was | Last balance | | | |
| | | ccount number | instrument | varit or | closed, sold, moved, or transferred | before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? | | | |
| Par | t 9: Identify Property You Hold or Control for | Someone Else | | | | | | | |
| 23. | Do you hold or control any property that some for someone. | | de any prope | rty you bor | rowed from, are storing fo | or, or hold in trust | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, St Code) | | Describe | the property | Value | | | |
| Par | t 10: Give Details About Environmental Inform | • | | | | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | | | | |
| | toxic substances, wastes, or material into the a | vironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or ic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or ulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Alan Bailey Craine, Jr.

Case number (if known)

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No | | | | | | | | |
|-----|--|---------------|--|----|--|--------------------|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and 2 | ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and 2 | ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | | |
| Par | t 11: Give Details About Your Bus | iness or Conn | ections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | | |
| | | | cribe the nature of the business | | Employer Identification number | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Nan | ne of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | | | |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date | e Issued | | | | | | |
| | | | | | | | | | |

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Case number (if known) Debtor 1 Alan Bailey Craine, Jr. Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alan Bailey Craine, Jr. Signature of Debtor 2 Alan Bailey Craine, Jr. Signature of Debtor 1 Date Date February 7, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform | nation to identify your o | ase: | | |
|-----------------------------------|--|---------------------|---|-----------------------------------|
| Debtor 1 | Alan Bailey Craine | , Jr. | | |
| Dahtar 0 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | WESTERN DIST | RICT OF MISSOURI | |
| | | | | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| Official Fo | rm 108 | | | |
| Statemer | nt of Intentio | n for Indiv | iduals Filing Under Chapte | r 7 12/15 |
| | | | J = | |
| If you are an indi | vidual filing under chap | oter 7, you must fi | Il out this form if: | |
| creditors have | claims secured by you | ır property, or | | |
| | ed personal property a | | | |
| | | | you file your bankruptcy petition or by the date set to time for cause. You must also send copies to the | |
| on the f | form | | · | · |
| | ople are filing together d date the form. | in a joint case, bo | oth are equally responsible for supplying correct in | ormation. Both debtors must |
| Be as complete a | and accurate as nossib | le. If more space i | s needed, attach a separate sheet to this form. On t | he top of any additional pages |
| | our name and case nun | | o nooded, andon a copulate choos to tine form on t | no top or any additional pages, |
| Part 1: List Yo | our Creditors Who Have | Secured Claims | | |
| | | | | |
| 1. For any credite information be | | rt 1 of Schedule D | Creditors Who Have Claims Secured by Property | (Official Form 106D), fill in the |
| | editor and the property the | at is collateral | What do you intend to do with the property that | Did you claim the property |
| | | | secures a debt? | as exempt on Schedule C? |
| | | | | |
| Creditor's C | itibank/Sears | | Surrender the property. | ■ No |
| name: | | | Retain the property and redeem it. | ☐ Yes |
| Description of | Washer & Dryer | | ☐ Retain the property and enter into a Reaffirmation Agreement. | □ res |
| property | ,, | | Retain the property and [explain]: | |
| securing debt: | | | | _ |
| | | | | |
| Creditor's N | BKC Bank | | ■ Surrender the property. | ■ No |
| name: | | | ☐ Retain the property and redeem it. | |
| Description of | 722 Lov Stroot Even | Jeior Springe | ☐ Retain the property and enter into a | ☐ Yes |
| property | 732 Ley Street Exce MO 64024 Clay Co | | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | | | Retain the property and [explain]. | |
| | property as having a | n Appraised | | |
| | Value of \$73,500.00 | | | |
| | debtor has placed the sale and over a year | | | |
| | months the highest | | | |

Official Form 108

Creditor's NBKC Bank

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

■ No

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| Debtor 1 Alan E | Bailey Craine, Jr. | Case number (if kno | own) |
|---|--|--|-------------------------------------|
| name: Description of property securing debt: | 2011 Dodge Caliber Heat 120,000+ miles VIN = 1B3CB5HA4BD160641 NADA Clean Retail Value: \$5,475.00 | □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| name: Description of property securing debt: | property as having an Appraised Value of \$73,500.00. However, debtor has placed this property for sale and over a year and 4 months the highest offer | Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ No □ Yes |
| For any unexpired in the information | below. Do not list real estate leases. Un | in Schedule G: Executory Contracts and Unexperience leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(| the lease period has not yet ended. |
| Describe your un | nexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: Description of lease Property: Lessor's name: Description of lease | | | □ No □ Yes □ No |
| Property: Lessor's name: Description of lease Property: | sed | | ☐ Yes ☐ No ☐ Yes |
| Lessor's name: Description of leas Property: | sed | | □ No □ Yes |
| Lessor's name: Description of least Property: Lessor's name: | sed | | □ No □ Yes |
| Description of least Property: | sed | | □ No □ Yes |
| Lessor's name: Description of leas Property: | sed | | □ No □ Yes |

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| 202 | otor 1 Alan Bailey Craine, Jr. | Case number (if known) |
|-------------|---|--|
| | | |
| | | |
| | | |
| | | |
| | <u></u> | |
| Part | t 3: Sign Below | |
| ıuı | egii zeleli | |
| Und | | ated my intention about any property of my estate that secures a debt and any personal |
| Und | er penalty of perjury, I declare that I have indic | ated my intention about any property of my estate that secures a debt and any personal |
| Und prop | er penalty of perjury, I declare that I have indic perty that is subject to an unexpired lease. | |
| Und prop | er penalty of perjury, I declare that I have indic perty that is subject to an unexpired lease. /s/ Alan Bailey Craine, Jr. | x |

| Fill in | this information to identify your case: | | Che | ck one | box only as d | irected in this form and | in Form |
|---|--|---|------------------------------------|-------------------------|------------------|--|-------------------------------|
| Debto | r 1 Alan Bailey Craine, Jr. | | _ 122 | A-1Sup | O: | | |
| Debto (Spouse | r 2 e, if filing) | | _ | 1. The | ere is no pres | umption of abuse | |
| United | d States Bankruptcy Court for the: Western District o | f Missouri | _ | ap | plies will be n | o determine if a presum nade under <i>Chapter 7 N</i> | • |
| Case (if know) | number n) | | - _ | | | icial Form 122A-2). | |
| | , | | | | | does not apply now be service but it could app | |
| | | | | ☐ Chec | k if this is a | n amended filing | |
| Offic | cial Form 122A - 1 | | | | | | |
| Cha | pter 7 Statement of Your Cui | rent Month | nly Inc | ome | | | 12/15 |
| attach a case nu qualifyi Part 1 | complete and accurate as possible. If two married people is a separate sheet to this form. Include the line number to warmer (if known). If you believe that you are exempted frowing military service, complete and file Statement of Exemple: Calculate Your Current Monthly Income What is your marital and filing status? Check one or | vhich the additional in m a presumption of al otion from Presumptio | formation ap | pplies. O se you do | n the top of a | ny additional pages, write narily consumer debts or | your name and because of |
| • | Not married. Fill out Column A, lines 2-11. | | | | | | |
| | \square Married and your spouse is filing with you. Fill \circ | ut both Columns A a | nd B, lines 2 | 2-11. | | | |
| | \square Married and your spouse is NOT filing with you. | You and your spou | ise are: | | | | |
| | ☐ Living in the same household and are not lega | ally separated. Fill o | ut both Colu | umns A | and B, lines 2 | 2-11. | |
| | Living separately or are legally separated. Fill penalty of perjury that you and your spouse are l living apart for reasons that do not include evading | egally separated und | der nonbank | kruptcy l | aw that applic | es or that you and your | |
| 101 the | in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p | nonth period would be N I by 6. Fill in the result. I | March 1 through Do not include | gh Augus e any inc | t 31. If the amo | ount of your monthly incomore than once. For example | e varied during e, if both |
| | | | | Column Debtor | | Column B Debtor 2 or non-filing spouse | |
| | Your gross wages, salary, tips, bonuses, overtime, payroll deductions). | and commissions | (before all | \$ | 3,746.71 | \$ | |
| | Alimony and maintenance payments. Do not include Column B is filled in. | payments from a sp | ouse if | \$ | 0.00 | \$ | |
| fi a | All amounts from any source which are regularly portion or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3. | Include regular con d, your dependents, p | tributions parents, B is not | \$ | 0.00 | \$ | |
| | Net income from operating a business, profession, | or farm | | | | | |
| | | Debtor 1 | 1 | | | | |
| | Gross receipts (before all deductions) | \$ <u>0.00</u> -\$ 0.00 | | | | | |
| | Ordinary and necessary operating expenses | 0.00 | py here -> S | c | 0.00 | \$ | |
| | Net monthly income from a business, profession, or far | m \$ CO | py nere -> : | Φ | 0.00 | Ψ | |
| 6. N | Net income from rental and other real property | Debtor 1 | 1 | | | | |
| (| Gross receipts (before all deductions) | \$ 0.00 | | | | | |
| | Ordinary and necessary operating expenses | -\$ 0.00 | | | | | |
| | Net monthly income from rental or other real property | \$ 0.00 Co | py here -> 9 | \$ | 0.00 | \$ | |
| | nterest, dividends, and royalties | | | \$ | 0.00 | \$ | |

Official Form 122A-1

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Alan Bailey Craine, Jr. Debtor 1 Case number (if known) Column A Column R Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3,746.71 +| \$ 3.746.71 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,746.71 Multiply by 12 (the number of months in a year) **x** 12 44,960.52 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: MO Fill in the state in which you live. Fill in the number of people in your household. 1 45,518.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Alan Bailey Craine, Jr. Alan Bailey Craine, Jr. Signature of Debtor 1 Date February 7, 2018 MM / DD / YYYY

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Missouri

| In re | Alan Bailey Craine, Jr. | | _ Case No. | |
|---------------|--|---|-------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSAT | TION OF ATTORN | EY FOR DI | EBTOR(S) |
| co | rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce mpensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in | e petition in bankruptcy, or a | greed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,200.00 |
| | Prior to the filing of this statement I have received | | \$ | 1,200.00 |
| | Balance Due | | \$ | 0.00 |
| 2. \$_ | 335.00 of the filing fee has been paid. | | | |
| 3. Tl | ne source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. Tl | ne source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. I | I have not agreed to share the above-disclosed compensation | n with any other person unle | ess they are mem | bers and associates of my law firm. |
| | I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of t | | | |
| 6. Ir | return for the above-disclosed fee, I have agreed to render leg | gal service for all aspects of | the bankruptcy | case, including: |
| b. c. | Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and of [Other provisions as needed] | of affairs and plan which may | y be required; | |
| 7. B <u>r</u> | agreement with the debtor(s), the above-disclosed fee does n (a) Representation of the Debtor(s) in any adversa the discharge, etc. | | | argeability of debt(s), to revoke |
| | (b) Filing any motion to reopen the case that is ne comply with the applicable law or rules | cessitated by the Debtor(| s) failure to tim | ely provide information or |
| | CER | TIFICATION | | |
| | ertify that the foregoing is a complete statement of any agreenthruptcy proceeding. | ment or arrangement for pay | ment to me for r | representation of the debtor(s) in |
| Fel | oruary 7, 2018 | /s/ Tracy L. Robinson | | |
| Da | • | Tracy L. Robinson Signature of Attorney The Law Offices of Tra 818 Grand Blvd., Suite Kansas City, MO 6410 816.842.1317 Fax: 8 admin@tlrlaw.com Name of law firm | e 505 06 | n, LC |

Citibank/Sears Acct No xxxx xxxx xxxx 3456 PO Box 6282 Sioux Falls SD 57117-6282

Citibank/Sears
Acct No xxxx xxxx xxxx 3456
PO Box 6283
Sioux Falls SD 57117-6283

Citibank/Sears
Acct No xxxx xxxx xxxx 3456
PO Box 6497
Sioux Falls SD 57117-6497

Citibank/Sears
Acct No xxxx xxxx xxxx 3456
PO Box 6241
Sioux Falls SD 57117

National Bank of Kansas City Acct No xxx-xxxxxxx3371 10700 Nall Avenue Overland Park KS 66211

National Bank of Kansas City 10700 Nall Avenue Overland Park KS 66211

NBKC Bank Acct No xxx-xxxxxxx3371 8320 Ward Parkway Kansas City MO 64114

NBKC Bank 8320 Ward Parkway Kansas City MO 64114

SYNCB/Walmart PO Box 965024 Orlando FL 32896-5024

SYNCB/Walmart PO Box 965036 Orlando FL 32896-5036 Synchrony Bank/Walmart Attn: Bankruptcy Department PO Box 965060 Orlando FL 32896-5060

Wells Fargo Home Mortgage Acct No xxxxxx7918 Bankruptcy Dept/Correspondence PO Box 10335 Des Moines IA 50306

Wells Fargo Home Mortgage Acct No xxxxxx7918 666 Walnut Street Suite 400 Des Moines IA 50309 Case 18-40338-can7 Doc 1 Filed 02/07/18 Entered 02/07/18 16:28:47 Desc Main Document Page 45 of 49

United States Bankruptcy Court Western District of Missouri

| In re | Alan Bailey Craine, Jr. | | Case No. | |
|-------|---------------------------------------|----------------------------------|------------|--------------|
| | · | Debtor(s) | Chapter | 7 |
| | | | | |
| | VERIFICA | ATION OF MAILING MATR | <u>IX</u> | |
| | The above-named Debtor(s) | hereby verifies that the attache | ed list of | creditors is |
| | true and correct to the best of my ki | nowledge and includes the nam | e and add | lress of my |
| | ex-spouse (if any). | | | |
| | | | | |
| Date: | February 7, 2018 | /s/ Alan Bailey Craine, Jr. | | |
| | | Alan Bailey Craine, Jr. | | |

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.